Case 17-12304 Doc 1 Filed 04/19/17 Entered 04/19/17 14:41:09 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
	_	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Samantha First name L Middle name Holder Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9561	

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Case number (if known)

Debtor 1 Samantha L Holder

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2813 Cole Lane New Lenox, IL 60451 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Will County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Samantha L Holder

Part	2: Tell the Court About	our B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	choosing to file under							
		□ CI	hapter 11					
		□ с	hapter 12					
		□ CI	hapter 13					
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court fo about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's cheorder. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card a pre-printed address.						
					tallments. If you choose this s (Official Form 103A).	s option, sign and attach the Application	for Individuals to Pay	
						option only if you are filing for Chapter 7		
			applies to you	ır family size ar	nd you are unable to pay the	y if your income is less than 150% of the fee in installments). If you choose this o	ption, you must fill out	
			the Application	on to Have the (Chapter 7 Filing Fee Waived	(Official Form 103B) and file it with your	petition.	
9.	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye	s.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	□ Ye						
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if know	vn	
			Debtor			Relationship to you		
			District		When	Case number, if know	vn	
11.	Do you rent your residence?	■ No	Go to li	ne 12.				
		☐ Ye	es. Has yo	ur landlord obta	ained an eviction judgment a	ngainst you and do you want to stay in yo	our residence?	
				No. Go to line	12.			
				Yes. Fill out Inbankruptcy per		ction Judgment Against You (Form 101A	a) and file it with this	

Document Page 4 of 60 Case number (if known) Samantha L Holder Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Samantha L Holder

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 60 Case number (if known) Debtor 1 Samantha L Holder Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50.000.001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion ■ \$1,000,001 - \$10 million estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million to be? □ \$100,001 - \$500,000 □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million □ \$500,001 - \$1 million ■ More than \$50 billion □ \$100,000,001 - \$500 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Samantha L Holder Signature of Debtor 2 Samantha L Holder Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on April 17, 2017

MM / DD / YYYY

Debtor 1 Samantha L Holder Document Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	J Winter	Date	April 17, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel J W	/inter		
Printed name			
Law Office	es of Daniel J Winter		
Firm name			
53 W Jack	son Boulevard		
Suite 718			
Chicago, I	L 60604		
	City, State & ZIP Code		
Contact phone	312-427-1613	Email address	djw@dwinterlaw.com
6208223			
Par number 9 C	toto		

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De	ebtor 1	Samantha L Hol	der			Case num	Der (if known)
Pa	irt 6:	Answer These Que	stions for F	Reporting Purposes			oo. [a nicetij
16	. Wha	t kind of debts do have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "inclinidividual primarily for a personal, family, or household purpose."				
				No. Go to line 16b		oasanola parpose.	
				☐ Yes. Go to line 17			
			16b.	Are your debts prim		Business debts are debt	s that you incurred to obtain
				☐ No. Go to line 16c	•		Silves of arvestigate.
				Yes. Go to line 17.			
			16c.	State the type of debt	s you owe that are not co	ensumer debts or busine	ess debts
17.	Are y	ou filing under ter 7?	□ No.	I am not filing under C	Chapter 7. Go to line 18.		
	after a prope admir	ou estimate that any exempt erty is excluded and distrative expenses	Yes.		oter 7. Do you estimate the	at after any exempt pro e to unsecured creditors	perty is excluded and administrative expenses ?
	are pa	aid that funds will		No No			
·		oution to unsecured		☐ Yes			
18.	How r	nany Creditors do	1-49		□ 1,000-5,	000	
	you es	stimate that you	□ 50-99		☐ 5001-10,		☐ 25,001-50,000 ☐ 50,001-100,000
			☐ 100-19 ☐ 200-99		□ 10,001-2		☐ More than100,000
19.	How n	nuch do you	□ \$0 - \$5	50 000	T \$4,000.0	O4	
	estima be wo	ite your assets to rth?		71 - \$100,000	□ \$10,000,0	01 - \$10 million 001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
				001 - \$500,000	□ \$50,000,0	001 - \$100 million	☐ \$10,000,000,001 - \$50 billion
			□ \$500,0	01 - \$1 million	□ \$100,000	0,001 - \$500 million	☐ More than \$50 billion
20.	How m	uch do you	□ \$0 - \$5	60.000			—
	estima to be?	te your liabilities	\$50,00	01 - \$100,000	\$1,000,00 \$1,000,00	01 - \$10 million 001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
			5100,0	01 - \$500,000	□ \$50,000,0	001 - \$50 million 001 - \$100 million	☐ \$1,000,000,001 - \$50 billion
			☐ \$500,001 - \$1 million		□ \$100,000	0,001 - \$500 million	☐ More than \$50 billion
Part	7: Si	gn Below					
Fory	/ou		I have exa	mined this petition, and	I declare under penalty of	of periury that the inform	nation provided is true and correct.
			If I have ch	nosen to file under Char	oter 7. I am aware that I m	nov proposed if climible	under Chapter 7, 11,12, or 13 of title 11,
			If no attorn	ey represents me and I		121/ compone who is not	an attorney to help me fill out this
			I request re	elief in accordance with	the chapter of title 11, Ur	nited States Code, spec	ified in this petition.
			I understan	nd making a false staten	ment concealing property		property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			Samantha Signature o	a L Holder of Debtor 1		Signature of Debtor	2
			Executed o	MM/DD/YYYY	1/1/17	Executed on MM /	DD/YYYY

		DOCUM	eni Pade 9 dibi	U	
Fill in this infor	mation to identify your	case:			
Debtor 1	Samantha L Hold	er			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	328,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,991.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	352,991.00
a	t 2: Summarize Your Liabilities		
			abilities t you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	300,801.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,299,102.00
	Your total liabilities	\$	1,599,903.00
a	t 3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,881.31
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	10,837.00
a	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7 .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

the court with your other schedules.

Debtor 1 Samantha L Holder Page 10 of 60 Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	196,160.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	196,160.00

	(Case 17-12304	Doc 1		04/19/17 ument	Entered 04/19/17	14:41:09	Desc	Main	
Fill	in this inf	ormation to identify yo	our case and t							
Deb	otor 1	Samantha L Ho	older							
		First Name	Midd	le Name		Last Name				
	otor 2 use, if filing)	First Name	Midd	le Name		Last Name				
Unit	ted States	Bankruptcy Court for the	e: NORTHE	RN DISTI	RICT OF ILLIN	IOIS				
Cas	e number					_			Check if this i	s an
									amended filin	g
Off	ficial F	Form 106A/B								
Sc	chedi	ule A/B: Pro	perty						12 <i>/</i> *	15
nink nfor	it fits best mation. If r ver every q	. Be as complete and acc nore space is needed, atta	eurate as possib ach a separate s	ole. If two sheet to th	married people is form. On the	n asset fits in more than one c e are filing together, both are e e top of any additional pages, v on or Have an Interest In	qually responsib	le for supp	lying correct	
D	o vou own	or have any logal or equit	able interest in	any roeid	nco building	land, or similar property?				
		, , , ,	able interest in	arry reside	ance, bunding,	iana, or similar property:				
Ц	No. Go to	Part 2.								
	Yes. Whe	re is the property?								
1.1				What	is the property	? Check all that apply				
		ole Lane ess, if available, or other descrip	tion	_	Single-family h	ome			s or exemptions. P	
	Street addit	ess, ii avaliable, oi otilei descrip	uon		Duplex or mult	· ·	the amount of any secured claims on a Creditors Who Have Claims Secured I			
					Condominium	or cooperative				
					Manufactured	or mobile home	Current value of	f tha	Current value of th	
	New Le	nox IL 6	60451-0000		Land		entire property?		portion you own?	ie
	City	State	ZIP Code		Investment pro	pperty	\$328,00	00.00	\$328,000	0.00
					Timeshare				r ownership intere	
				_	Other	in the property? Check one	(such as fee sin a life estate), if	. • ′	cy by the entireties	s, or
				Wilo	ias an interest	in the property: Check one	Joint Tenant		ather- David	
					Debtor 1 only		Shepard and	d Mother	Bernice Shep	ard
	Will				Debtor 2 only					
	County				Debtor 1 and D	Debtor 2 only	Check if thi	is is commi	unity property	
						the debtors and another	(see instruction			
					information your rty identification	ou wish to add about this item, on number:	such as local			
					•	011 for \$327,829.00				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$328,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 17-12304 Doc 1 Filed 04/19/17 Entered 04/19/17 14:41:09 Desc Main Document Page 12 of 60 Case number (if known) Debtor 1 Samantha L Holder 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: F150 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2016 Year: Debtor 2 only Current value of the Current value of the entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another 1/2 owner with Husband Kyle \$20,000.00 \$20,000.00 Holder ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$20,000.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household goods, including furniture, kitchenware, living room, \$2,000.00 dining room (1/2 owner with husband) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$200.00 2 tvs (4 & 8 years old), nintendo game system, laptop computer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No Yes. Describe.....

\$150.00

elliptical exercise machine

Case 17-12304 Doc 1 Filed 04/19/17 Entered 04/19/17 14:41:09 Desc Main Document Page 13 of 60 Case number (if known) Debtor 1 Samantha L Holder 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$150.00 clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... costume jewelry, wedding ring \$300.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$90.00 dog 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,890.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash \$100.00 17. Deposits of money

17.1. Checking

□ No

■ Yes.....

BMO Harris - Joint with husband total

institutions. If you have multiple accounts with the same institution, list each.

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

Institution name:

balance listed

page 3

\$2,000.00

D	ebtor 1	Samantha L H	older	Document	Page 14 of 6	OCase number ((if known)	
				-1		(
18.			publicly traded stoo vestment accounts w	c ks vith brokerage firms, mo	ney market accounts			
	■ No							
	☐ Yes		Institution or i	ssuer name:				
19.	Non-pu		k and interests in ir	ncorporated and uning	corporated business	ses, including a	n interest in	an LLC, partnership, and
	□ No	omai o						
	Yes.	Give specific inforr	mation about them					
			Name of entity:			% of ownersh	ip:	
			Dental Service	hip interest in Sama s LLC fdba Autumn t to security interes	Dental (closed			
			Midwest Bank		t by First	100%	%	\$1.00
_							_	
20	Negotia Non-ne ■ No	able instruments in	clude personal check ots are those you can	r negotiable and non-r ss, cashiers' checks, pro not transfer to someone	omissory notes, and r	noney orders.		
			Issuer name:					
21.		nent or pension aciles: Interests in IR/		1(k), 403(b), thrift savin	gs accounts, or other	pension or profit	-sharing pla	ns
	■ No							
	☐ Yes. I	List each account s	separately. Type of account:	Institution	namo:			
			Type of account.	msutation	name.			
22.	Your sh Examp		deposits you have ma	ade so that you may con I rent, public utilities (ele			s companies	, or others
	■ No			Institution	name or individual:			
	□ res			mondadii	name of marriada.			
23.	Annuiti No	es (A contract for a	a periodic payment of	f money to you, either fo	or life or for a number	of years)		
	☐ Yes	lssu	er name and descript	tion.				
24	26 U.S.0		IRA, in an account 9A(b), and 529(b)(1).	in a qualified ABLE pr	ogram, or under a q	ualified state tu	ition progra	am.
	■ No □ Yes	Instit	tution name and desc	cription. Separately file	the records of any int	erests 11 U.S.C.	8 521(c):	
					,		• ()	
25.	■ No	•		erty (other than anythi	ng listed in line 1), a	and rights or po	wers exerci	sable for your benefit
	⊔ Yes.	Give specific inforr	mation about them					
26				ets, and other intellect proceeds from royalties		nents		
		Give specific inforr	mation about them					
		•						
27.			d other general inta ts, exclusive licenses	ngibles s, cooperative association	on holdings, liquor lice	enses, professior	nal licenses	
	_	Give specific inforr	mation about them					
М	onev or r	property owed to	vou?					Current value of the
	y o. p		,					portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

		Case 17-12304	Doc 1	Filed 04/19/17		Desc Main
Deb	tor 1	Samantha L Holder		Document	Page 15 of 60 Case number (if known)	
_	_	unds owed to you				
	■ No I Yes.	Give specific information at	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
	<i>Examp</i> No	support les: Past due or lump sum Give specific information		usal support, child supp	ort, maintenance, divorce settlement, property	settlement
	Examp	amounts someone owes y les: Unpaid wages, disabili benefits; unpaid loans Give specific information	ty insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
31. I	nteres	ts in insurance policies	e insurance; ł	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce
	Yes.	Name the insurance compa Com	any of each p pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
		Terr	n Life- Stat	e Farm	Children	\$0.00
33. (C) 34. (C) 35. (A)	Claims Examp No Yes. Other c No Yes. Any fin	oles: Accidents, employment Describe each claim	nt disputes, in	surance claims, or rights	it or made a demand for payment sto sue g counterclaims of the debtor and rights to	set off claims
36.					ny entries for pages you have attached	\$2,101.00
Part	5: Des	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
=	No. Go	own or have any legal or equiton to Part 6. So to line 38.	itable interest	in any business-related p	roperty?	
Part		scribe Any Farm- and Commo			n or Have an Interest In.	
46. I	No.	own or have any legal or Go to Part 7. . Go to line 47.	equitable in	terest in any farm- or o	commercial fishing-related property?	

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Debtor 1 Samantha L Holder

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$328,000.00 Part 2: Total vehicles, line 5 \$20,000.00 57. Part 3: Total personal and household items, line 15 \$2,890.00 Part 4: Total financial assets, line 36 58. \$2,101.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$24,991.00 Copy personal property total \$24,991.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$352,991.00

Official Form 106A/B Schedule A/B: Property page 6

		IAAAIII.		
Fill in this inform	mation to identify your	case:		
Debtor 1	Samantha L Hold	ler		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	t of the exemption you claim	Specific laws that allow exemption
2813 Cole Lane New Lenox, IL 60451 Will County Purchased in 2011 for \$327,829.00 Line from Schedule A/B: 1.1	\$328,000.00	\$15,000.00 00% of fair market value, up to my applicable statutory limit	735 ILCS 5/12-901
2016 Ford F150 1/2 owner with Husband Kyle Holder Line from <i>Schedule A/B</i> : 3.1	\$20,000.00	\$2,400.00 00% of fair market value, up to ny applicable statutory limit	735 ILCS 5/12-1001(c)
Household goods, including furniture, kitchenware, living room, dining room (1/2 owner with husband) Line from Schedule A/B: 6.1	\$2,000.00	\$1,000.00 00% of fair market value, up to my applicable statutory limit	735 ILCS 5/12-1001(b)
2 tvs (4 & 8 years old), nintendo game system, laptop computer Line from <i>Schedule A/B</i> : 7.1	\$200.00	\$200.00 00% of fair market value, up to my applicable statutory limit	735 ILCS 5/12-1001(b)
elliptical exercise machine Line from Schedule A/B: 9.1	\$150.00	\$150.00 00% of fair market value, up to ny applicable statutory limit	735 ILCS 5/12-1001(b)

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Samantna L Holder			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
clothes Line from Schedule A/B: 11.1	\$150.00			735 ILCS 5/12-1001(a)
Line from Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
costume jewelry, wedding ring Line from Schedule A/B: 12.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
dog Line from Schedule A/B: 13.1	\$90.00		\$90.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A/B. 1911			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Ellie Holli Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
Checking: BMO Harris - Joint with husband total balance listed	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Sole membership interest in Samantha Holder Dental Services	\$1.00		\$1.00	735 ILCS 5/12-1001(b)
LLC fdba Autumn Dental (closed 3/2017, subject to security interest by First Midwest Bank) 100% Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
Term Life- State Farm	\$0.00			215 ILCS 5/238
Beneficiary: Children Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ises fi	iled on or after the date of adjustmer	,

		Document F	Page 19 of	60		
Fill in this inform	ation to identify you	ır case:				
Debtor 1	Samantha L Ho	lder				
20210	First Name		_ast Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name L	_ast Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Forms	40CD					
Official Form				_		
Schedule I	D: Creditors	Who Have Claims Se	<u>ecured by</u>	y Propert	у	12/15
		If two married people are filing together, out, number the entries, and attach it to t				
 Do any creditors I 	have claims secured by	y your property?				
☐ No. Check	this box and submit tl	his form to the court with your other sol	hedules. You ha	ave nothing else t	to report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the credito	or separately C	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	s a particular claim, list the other creditors in ical order according to the creditor's name.	Part 2. As A D	mount of claim to not deduct the alue of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ford Moto	r Credit	Describe the property that secures the		\$14,787.00	\$20,000.00	\$0.00
Creditor's Name		2016 Ford F150				
National B Service Ce		1/2 owner with Husband Kyle I	Holder			
Po Box 62		As of the date you file, the claim is: Che	eck all that			
	Springs, CO	apply. Contingent				
80962		□ Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
Who owes the del	at? Chack one	☐ Disputed Nature of lien. Check all that apply.				
_	or oncor one.	_	***************************************			
■ Debtor 1 only ■ Debtor 2 only		 An agreement you made (such as mor car loan) 	rigage or secured			
Debtor 1 and Del	htor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit	riic s lieri)			
☐ Check if this cla			ease			
community deb	ot	— Other (moldaling a right to onset)				
Date debt was incu	Opened 02/17 Last Active		- 2662			
Date debt was incu	rred <u>3/24/17</u>	Last 4 digits of account number				
	o Hm Mortgag	Describe the property that secures the		\$286,014.00	\$328,000.00	\$0.00
Creditor's Name		2813 Cole Lane New Lenox, IL				
		60451 Will County Purchased in 2011 for \$327,829	9.00			
0.400 Ct	aaaah Cir	As of the date you file, the claim is: Che				
8480 Stage Frederick,		apply.				
	City, State & Zip Code	Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mor	rtgage or secured			
Debtor 2 only		car loan)	- 5			
Debtor 1 and Del	otor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				

Official Form 106D

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Debtor 1 Samantha	L Holder		Cas	se number (if know)	
First Name	Middle Nar	me Last Name			
☐ Check if this claim re	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 10/11 Last Active 4/04/17	Last 4 digits of account number	6369		
	of your form, add tl	lumn A on this page. Write that number he dollar value totals from all pages.	nere:	\$300,801.00 \$300,801.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ca	36 17-12304 L	Docu Docu	ment Page 21 of 60	1.41.03 Desc iv	iaiii
Fill	n this inform	nation to identify your				
Deb	tor 1	Samantha L Hold	۵r			
200	.0. 1	First Name	Middle Name	Last Name	_	
	tor 2				_	
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTR	RICT OF ILLINOIS		
Cas	e number					
(if kno					☐ Check	if this is an
					amend	ded filing
	cial Form	<u>106E/F</u> /F: Creditors W	/ho Have Uns	ecured Claims		12/15
iny e Schei Schei eft. A name	xecutory contribute G: Execut dule G: Execut dule D: Credito ttach the Contribute and case num	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	that could result in a c ired Leases (Official Fo ured by Property. If mo le. If you have no inforn	ith PRIORITY claims and Part 2 for creditors with laim. Also list executory contracts on Schedule orm 106G). Do not include any creditors with partice space is needed, copy the Part you need, fill in nation to report in a Part, do not file that Part. Or	A/B: Property (Official For tially secured claims that a t out, number the entries i	rm 106A/B) and on are listed in n the boxes on the
Part	1: List Al	l of Your PRIORITY Un	secured Claims			
1. I	Do any credito	rs have priority unsecure	d claims against you?			
	No. Go to Pa	art 2.				
ı	☐ Yes.					
Part	2: List Al	l of Your NONPRIORIT	Y Unsecured Claims	S		
3. I	Do any credito	rs have nonpriority unsec	cured claims against yo	u?		
I	☐ No. You hav	re nothing to report in this p	art. Submit this form to th	ne court with your other schedules.		
ı	Yes.					
t	unsecured claim	n, list the creditor separately	y for each claim. For each	Il order of the creditor who holds each claim. If a h claim listed, identify what type of claim it is. Do not Part 3.If you have more than three nonpriority unsections.	list claims already included	in Part 1. If more
					Tota	al claim
4.1	Airgas		Last 4 o	digits of account number		\$125.00
	Nonpriority	Creditor's Name				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		ckside Woods Blvd	•••	vas the debt incurred?		
		dence, OH 44131-23 reet City State Zlp Code		ne date you file, the claim is: Check all that apply		
		red the debt? Check one.		,		
	☐ Debtor	1 only	☐ Con	tingent		
	☐ Debtor	2 only		quidated		
	☐ Debtor	1 and Debtor 2 only	□ Disp			
	At least	one of the debtors and an		NONPRIORITY unsecured claim:		
		if this claim is for a com		dent loans		
	debt	13 101 4 001111		gations arising out of a separation agreement or divo	orce that you did not	
		m subject to offset?	report a	s priority claims	·	
	■ No			ts to pension or profit-sharing plans, and other simila	ar debts	
	☐ Yes		Othe	er. Specify Business utility		

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Debtor 1 Samantha L Holder Case number (if know) 4.2 \$280.00 **Associated Radiologists of Joliet** Last 4 digits of account number Nonpriority Creditor's Name c/o CCB When was the debt incurred? PO Box 63 Kankakee, IL 60901-0063 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Medical Other. Specify 4.3 **Bank Of America** Last 4 digits of account number \$8,205.00 3726 Nonpriority Creditor's Name Nc4-105-03-14 Opened 04/00 Last Active Po Box 26012 When was the debt incurred? 2/17/17 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Benco Dental** Last 4 digits of account number \$2,122.00 Nonpriority Creditor's Name 295 Centerpoint Blvd PO Box 491 When was the debt incurred? Pittston, PA 18640-0491 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Dental equipment ☐ Yes

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Debtor 1 Samantha L Holder Case number (if know) 4.5 \$9,611.00 Capital One Last 4 digits of account number 7283 Nonpriority Creditor's Name General Opened 03/16 Last Active Correspondence/Bankruptcy When was the debt incurred? 3/13/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Business Account ☐ Yes 4.6 **Chase Card** Last 4 digits of account number 4835 \$12,372.00 Nonpriority Creditor's Name Opened 01/14 Last Active Attn: Correspondence Dept 4/03/17 Po Box 15298 When was the debt incurred? Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.7 **Chase Card** \$279.00 Last 4 digits of account number 7388 Nonpriority Creditor's Name Opened 04/16 Last Active Attn: Correspondence Dept Po Box 15298 When was the debt incurred? 3/07/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No

☐ Yes

■ Other. Specify Credit Card

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Case number (if know)

Debtor	1 Samantha L Holder		Case number (if know)	
4.8	Citibank / Sears	Last 4 digits of account number	7414	\$2,461.00
	Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Box 790040	When was the debt incurred?	Opened 08/11 Last Active 2/06/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify ☐ Credit Card		
4.9	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	5928	\$765.00
	PO Box 3001 Southeastern, PA 19398-3001 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Servcies- B	Business	
4.1	Comenity Bank/Ann Taylor Loft Nonpriority Creditor's Name	Last 4 digits of account number	9625	\$6,086.00
	Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 05/16 Last Active 3/10/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other, Specify Credit Card		
	□ 100	Uther, Specify Circuit Card		

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Case number (if know) Debtor 1 Samantha L Holder 4.1 Comenitycapital/ultamc 8696 \$5,881.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/01/16 Last Active Po Box 182120 When was the debt incurred? 2/06/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes **Crown Council Inc** \$398.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 975 Woodoak Lane Salt Lake City, UT 84117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Professional Membership fees** Other. Specify 4.1 First Midwest Bank \$598,000,00 Last 4 digits of account number 3 Nonpriority Creditor's Name 7800 W 95th Street When was the debt incurred? Hickory Hills, IL 60457 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Business Loan - Secured by Dental** Other. Specify ☐ Yes **Practice**

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Debtor 1 Samantha L Holder Case number (if know) 4.1 Jemco & Assoc. Ltd \$350,000.00 Last 4 digits of account number Nonpriority Creditor's Name 242 Bunting Lane When was the debt incurred? Bloomingdale, IL 60108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Office Lease- Through 2024 ☐ Yes 4.1 Nelnet 8874 \$139,054.00 Last 4 digits of account number Nonpriority Creditor's Name Nelnet Claims/Bankruptcy Opened 09/06 Last Active Po Box 82505 When was the debt incurred? 4/28/15 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 8974 Nelnet \$57,106.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Nelnet Claims/Bankruptcy Opened 09/06 Last Active Po Box 82505 When was the debt incurred? 4/28/15 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Official Form 106 E/F

Educational

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Debtor 1 Samantha L Holder Case number (if know) 4.1 **Nicor Gas** \$275.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5407 When was the debt incurred? Carol Stream, IL 60197-5407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Business Services ☐ Yes 4.1 Offcite \$203.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 3010 Highland Parkway When was the debt incurred? Suite 625 **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Business Web services ☐ Yes 4.1 **Patterson Dental** \$95,000.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 1031 Mendota Rd When was the debt incurred? Saint Paul, MN 55120 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify purchase

Dental Equipment - Secured by equipment

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Debtor 1 Samantha L Holder Case number (if know) 4.2 Silver Cross Hospital \$1,139.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 1200 Maple Road When was the debt incurred? Joliet, IL 60432 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 Synchrony Bank/Gap 6014 \$4,679.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/10 Last Active Po Box 956060 When was the debt incurred? 3/01/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Tdrcs/furniture First** 5637 \$632.00 2 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/14 Last Active 1000 Macarthur Blvd When was the debt incurred? 3/31/17 Mahwah, NJ 07430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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Debtor	1 Samantha	L Holder		Case n	number (if know)		
4.2	Technic Der		Last 4 digits of account number				\$4,269.00
	Nonpriority Cred	3rd Place	When was the debt incurred?				
-	Number Street C	ci, IL 60467-4910 City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
	_	he debt? Check one.					
	☐ Debtor 1 only	У	☐ Contingent				
	Debtor 2 only	y	☐ Unliquidated				
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		s claim is for a community	☐ Student loans				
	debt Is the claim sub	niact to offsat?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce	that you did not	
		oject to onset:	Debts to pension or profit-shari	na nlono i	and other similar de	ohto	
	■ No		·	•		:015	
	Yes		Other. Specify Business-	Dental I	ab services		
4.2	Village of M		Last 4 digits of account number				\$160.00
	Nonpriority Cred 11004 Carpe Mokena, IL	enter St 60448	When was the debt incurred?				
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
	_	he debt? Check one.					
	Debtor 1 only	•	☐ Contingent				
	☐ Debtor 2 only	У	☐ Unliquidated				
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if this	s claim is for a community	☐ Student loans				
	debt Is the claim sub	·	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce	that you did not	
	■ No		Debts to pension or profit-shari	ng plans, a	and other similar de	ebts	
	☐ Yes		Other. Specify Water bill-	Busines	ss		
Part 3:	List Others	to Be Notified About a Deb	nt That You Already Listed				
i. Use th is tryir have n	is page only if y ng to collect from more than one c	ou have others to be notified al	bout your bankruptcy, for a debt that meone else, list the original creditor i you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list the	collection agency here.	. Similarly, if you
Name ar	nd Address	(On which entry in Part 1 or Part 2 did yo	u list the o	riginal creditor?		
	lona Law Fir		_ine 4.19 of (Check one):	☐ Part 1: 0	Creditors with Priori	ity Unsecured Claims	
360 W Suite 3	' Butterfield F วกก	₹d	ı	Part 2: 0	Creditors with Nonp	oriority Unsecured Claims	3
	ırst, IL 60126	}					
			ast 4 digits of account number				
Part 4:	Add the An	nounts for Each Type of Un	secured Claim				
6. Total t	the amounts of o	certain types of unsecured clair	ms. This information is for statistical	reporting	purposes only. 28	3 U.S.C. §159. Add the a	amounts for each
type o	of unsecured cla	IIII .					
	6a.	Domestic support obligations		6a.	Total	Claim	
Т	Total	Domestic support obligations		Ja.	Ψ	0.00	
cla	aims	-		<u></u>			
from Pa		Taxes and certain other debts		6b.	\$	0.00	
	6c. 6d.		njury while you were intoxicated ecured claims. Write that amount here.	6c. 6d.	\$ 	0.00	
	ou.	Salet. Add all other priority drist	course ciaims. Write that amount nere.	ou.	Φ	0.00	
					1		

6e.

6e. Total Priority. Add lines 6a through 6d.

0.00

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Debtor 1 Samantha L Holder

Total Nonpriority. Add lines 6f through 6i.

Total claims from Part 2

6f.	\$	Total Claim 196,160.00
t 6g.	\$	0.00
6h.	\$	0.00
6i.	\$	1,102,942.00
	t 6g. 6h.	6g. \$6h. \$6i.

1,299,102.00

		17(7(4)1111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Samantha L Hold	ler		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ford Motor Credit
National Bankruptcy Service Center
Po Box 62180
Colorado Springs, CO 80962

State what the contract or lease is for
Auto Lease

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Fill in th	nis information to identify your	case:		
Debtor 1	Samantha L Hold	er		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case nu (if known)	imber			☐ Check if this is an amended filing
	al Form 106H edule H: Your Cod	ebtors		12/15
eople a ill it out our nan	re filing together, both are equ , and number the entries in the ne and case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct information. If more the Additional Page to this page	and accurate as possible. If two married space is needed, copy the Additional Page, . On the top of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, o	lo not list either spouse as a codebt	or.
Y	´es			
			operty state or territory? (Commu erto Rico, Texas, Washington, and V	nity property states and territories include Wisconsin.)
	lo. Go to line 3. 'es. Did your spouse, former spor	use, or legal equivalent live	with you at the time?	
in li For	ne 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make sure you ha	use is filing with you. List the person shown we listed the creditor on Schedule D (Official chedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		n 2: The creditor to whom you owe the debt all schedules that apply:
3.1	David & Bernice Shepard 19617 Sycamore St Mokena, IL 60448		□ Sch □ Sch	edule D, line2.2 edule E/F, line edule G Fargo Hm Mortgag
3.2	Samantha L Holder Denta fdba Autumn Dental 19848 S LaGrange Rd-Un Mokena, IL 60448		■ Sch □ Sch	edule D, line edule E/F, line 4.23 _ edule G ic Dental Lab Inc
3.3	Samantha L Holder Denta fdba Autumn Dental 19848 S LaGrange Rd-Un Mokena, IL 60448		■ Sch	edule D, line edule E/F, line 4.9 edule G ast

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Debtor 1 Samantha L Holder Case number (if known)

	Additional Page to List More Codebtors						
3.4	Column 1: Your codebtor	Column 2: The creditor to whom you owe the deb Check all schedules that apply:					
	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.14 ☐ Schedule G Jemco & Assoc. Ltd					
3.5	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.4 ☐ Schedule G Benco Dental					
3.6	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.13 ☐ Schedule G First Midwest Bank					
3.7	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.19 ☐ Schedule G Patterson Dental					
3.8	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.5 ☐ Schedule G Capital One					
3.9	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.1 ☐ Schedule G Airgas					
3.10	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.17 ☐ Schedule G Nicor Gas					

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Debtor 1	Samantha L Holder	Case number (if known)						
	Additional Page to List More Codebtors							
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:						
3.11	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.24 ☐ Schedule G Village of Mokena						
3.12	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.18 ☐ Schedule G Offcite						
3.13	Samantha L Holder DentalServicesLLC fdba Autumn Dental 19848 S LaGrange Rd-Unit B Mokena, IL 60448	☐ Schedule D, line ■ Schedule E/F, line4.12 ☐ Schedule G Crown Council Inc						

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Fill	in this information to identify your c	ase:								
Deb	otor 1 Samantha L	. Holder			_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number own)		-			Check if this is An amendo A supplem	ed filing	ving postpetition c	hapter	
\bigcirc	fficial Form 1001					13 income	as of the	e following date:		
	fficial Form 106l					MM / DD/ `	YYYY			
	chedule I: Your Inc								12/15	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not inclu	de infor	mati	on about your sp	ouse. If	more space is ne	eded,	
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non	-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed	■ Employed			■ Employed			
		Employment status	☐ Not employed		☐ Not e	☐ Not employed				
		Occupation	Dentist Expected Job			Logisti	Mallincrodt Enterprises LLC 675 McDonnell Blvd Hazelwood, MO 63042			
	Include part-time, seasonal, or self-employed work.	Employer's name				Malling				
	Occupation may include student or homemaker, if it applies.	Employer's address	AZ	AZ						
		How long employed t	here?							
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	space.	Include your non-f	filing	
•	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the informatio	n for all	emplo	oyers for that perso	on on the	e lines below. If yo	u need	
						For Debtor 1		Debtor 2 or filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7,000.00	\$	4,992.00		
3.	Estimate and list monthly over	ime pay.		3.	+\$	0.00	+\$	0.00		

7,000.00

4,992.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Samantha L Holder	_	(Case	e number (if kno	own)				
					For	r Debtor 1		For	Debtor	2 or	
						i Debtoi i			n-filing s		
	Cop	y line 4 here	4.		\$_	7,000.	.00	\$	4	,992.00	0
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	1,400.	00	\$		972.83	3
	5b.	Mandatory contributions for retirement plans	5b		\$.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50	; .	\$.00	\$		199.3	
	5d.	Required repayments of retirement fund loans	5d	i.	\$.00	\$		265.1	
	5e.	Insurance	5e) .	\$	0.	.00	\$		473.42	2
	5f.	Domestic support obligations	5f.		\$	0.	.00	\$		0.00	0
	5g.	Union dues	5 g	J.	\$_	0.	.00	\$		0.00	0
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.	.00	+ \$_		0.00	<u>0</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,400.	.00	\$_	1	,910.69	9_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,600.	.00	\$_	3	,081.3°	1_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$_		.00	\$_		0.00	
	8b.	Interest and dividends	8b).	\$_	0.	.00	\$_		0.00	0_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$	1,200.	.00	\$		0.00	0
	8d.	Unemployment compensation	8d	i.	\$	· · · · · · · · · · · · · · · · · · ·	.00	\$_		0.00	0
	8e.	Social Security	8e) .	\$	0.	.00	\$		0.00	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_		.00	\$_		0.00	
	8g.	Pension or retirement income	89		\$_		.00	\$_		0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.	.00	+ \$_		0.00	<u>0</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	1,200.	.00	\$_		0.0	00
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		6,800.00	. ¢	3	081.31	= \$	9,881.31
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		0,000.00	Ψ_	3,	001.31]	3,001.31
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe							e <i>J.</i> +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	9,881.31
12	Do:	VALL expect an increase or decrease within the year often you file this form	2							Comb	ined nly income
١٥.	₽	/ou expect an increase or decrease within the year after you file this form No.	í								
	_	Yes Explain:									

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Fill	in this informa	tion to identify yo	our case:					
	otor 1	Samantha L				Ch	eck if this is:	
		Samanuna L	noidei				An amended fili	ng
	otor 2 ouse, if filing)							howing postpetition chapter of the following date:
` '	, 0,						·	
Unit	ed States Bankr	uptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	IOIS		MM / DD / YYY	Y
1	e number							
(If Ki	nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your I	Exper	ises				12/1
info	ormation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to	line 2. s Debtor 2 live i	n a senar:	ate household?				
	□ 163. D00		п а зерап	ate nousenoiu:				
			t file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		3	■ Yes
					Daughter		7	□ No
					Dauginei		'	
					Daughter		9	■ Yes
								□ No
3.	Do vour exp	enses include	_	NI-				Pes
0.	expenses of	f people other tl	nan 🗖	No Yes				
		d your depende	110:					
exp	imate your ex enses as of a		our bankrı	uptcy filing date unless y				Chapter 13 case to report p of the form and fill in the
• •	olicable date.							
Incl the	lude expense value of such	s paid for with r n assistance and	non-cash (d have inc	government assistance sluded it on Schedule I:	if you know Yo <i>ur Incom</i> e			
(Off	ficial Form 10	61.)					Your e	expenses
4.		or home owners and any rent for the		ses for your residence. r lot.	Include first mortgage	e 4.	\$	2,595.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	\$	0.00
			•	ipkeep expenses		4c.	· ·	0.00
5.		owner's associat nortgage payme		oominium dues our residence, such as ho	ome equity loans	4d. 5.		0.00

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Debtor 1	Samantha L Holder	Case num	nber (if known)	
S. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.		150.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		420.00
6d.	Other. Specify:	6d.		0.00
. Foo	d and housekeeping supplies		\$	750.00
Chile	dcare and children's education costs	8.	\$	300.00
Clot	thing, laundry, and dry cleaning	9.		150.00
	sonal care products and services	10.		100.00
	lical and dental expenses	11.	\$	500.00
	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	500.00
. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
. Cha	ritable contributions and religious donations	14.	\$	0.00
. Insu	ırance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	. Life insurance	15a.		50.00
	. Health insurance	15b.	· ·	0.00
15c.	Vehicle insurance	15c.	\$	260.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec		16.	\$	0.00
	allment or lease payments:			
	. Car payments for Vehicle 1	17a.	·	400.00
	Car payments for Vehicle 2	17b.		0.00
17c.	Other. Specify: Student loan after deferrment	17c.	\$	750.00
17d.	Other. Specify: Husband-car lease payment	17d.	\$	537.00
	Husband credit card bills		\$	150.00
	r payments of alimony, maintenance, and support that you did not report as			0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spec		19.		
	er real property expenses not included in lines 4 or 5 of this form or on Scho			2.22
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Othe	er: Specify: Rent in Arizona	21.	+\$	2,000.00
Utili	ities and home expenses in Arizona		+\$	700.00
Mov	ving expenses		+\$	200.00
Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	10,837.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	10,637.00
			· ·	10.007.00
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	10,837.00
. Calc	culate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,881.31
	Copy your monthly expenses from line 22c above.	23b.	·	10,837.00
23c.	Subtract your monthly expenses from your monthly income.	a =	•	055.00
	The result is your monthly net income.	23c.	\$	-955.69
_				
	you expect an increase or decrease in your expenses within the year after your			oneo or docroneo bossumo of a
	example, do you expect to finish paying for your car loan within the year or do you expect you ification to the terms of your mortgage?	попдаде	payment to incre	ease of decrease decause of a
■ N				
	'es. Explain here:			

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Fill in this inform	mation to identify your	case:				
Debtor 1	Samantha L Holo	ler				
	First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	st Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINO	IS		
Case number (if known)						Check if this is an amended filing
Official Forn						
Declarat	ion About a	an Individual De	ebte	or's Schedules		12/15
years, or both. 1	n Below	n connection with a bankrupto	y cas	e can result in fines up to \$25	ou,000, or imp	orisonment for up to 20
Did you pa	y or agree to pay some	eone who is NOT an attorney to	o help	you fill out bankruptcy forms	s?	
■ No						
☐ Yes. N	Name of person					etition Preparer's Notice, nature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the summary	and s	schedules filed with this decla	ration and	
X /s/ San	nantha L Holder		х			
Saman	tha L Holder re of Debtor 1			Signature of Debtor 2		

Date _____

Date April 17, 2017

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Fill in th	is inform	ation to identify your	case:						
Debtor 1		Samantha L Hold	er		Bearing and April 19				
Debtor 2		First Name	Middle Name	1	Last Name				
(Spouse if,		First Name	Middle Name	ı	ast Name				
United S	tates Ban	kruptcy Court for the:	NORTHERN DISTRIC	T OF ILLIN	OIS				
Case nui	mber								
,								Check if this is an amended filing	
Officia	Form	106Dec							
Decl	arati	on About a	n Individual	Debi	tor's Sch	edules		41	2/15
			both are equally respo						2115
Courmust	file this f	in and the state of the state o	both are equally respo	insidle for	supplying correct	t information.			
btaining	money o	orm whenever you file r property by fraud in	e bankruptcy schedules connection with a bank 19, and 3571.	s or amend	led schedules. Ma	aking a false statem	ent, co	ncealing property, o	r
ears, or l	ooth. 18 L	J.S.C. §§ 152, 1341, 15	19, and 3571.	мирису са	se can result in fir	nes up to \$250,000,	or impi	risonment for up to	20
Charles Section	NIN .								
	Sign B	selow							
Didy	ou pay o	r agree to pay someo	ne who is NOT an attor	ney to help	you fill out bank	ruptcy forms?			
	No								
	Yes, Nan	ne of person			¥	Attach Bankru	ptcv Pei	ition Preparer's Notice	
						Declaration, ar	nd Signe	ature (Official Form 11	19)
Under	penalty	of perjury, I declare th	at I have read the sum	mary and s	chedules filed wi	th this declaration	and		
that tr	rey are tr	ue and correct.			The state of the s	ar triis decidration a	iiiu		
X		- 14		х					
		L Holder f Debtor 1			Signature of Debt	tor 2			***************************************
Da	ate 4	117117			Date				
	2	1			Date				

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Ħ	in this inform	nation to identify you	r case.			
_	btor 1	Samantha L Hol				
De	DIOI I	First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Co	se number					
	nown)				_	check if this is an mended filing
<u> </u>	··· · · -	407				
	ficial For		Affaire for Individ	duals Eiling for B	ankruntov	A 14 A
				duals Filing for B		4/16
nfo	rmation. If m	ore space is needed,	attach a separate sheet to		equally responsible for sup y additional pages, write you	
nun	nber (if known). Answer every que	stion.			
Pa	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	■ Married					
	□ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you I	ived in the last 3 years. Do n	ot include where you live now	ı.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3.	Within the la	st 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property
stat	es and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
	■ No					
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explain	n the Sources of You	r Income			
_						
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	r last calenda nuary 1 to De	year: cember 31, 2016)	☐ Wages, commissions, bonuses, tips	\$32,844.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Samantha L Holder Page 42 Of 60 Case number (if known)

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For the calendar year before that: (January 1 to December 31, 2015)	☐ Wages, commissions, bonuses, tips	\$118,991.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1		Debtor 2				
Sources of income	Gross income from	Sources of income	Gross income			
Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)			

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

- 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
 - No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

■ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

- * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
- Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701	Monthly	\$2,595.00	\$286,014.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other

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Debtor 1 Samantha L Holder

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Ford Motor Credit National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962	Monthly	\$400.00	\$14,787.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partners partners are more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No					
	Yes. List all payments to an insider.	Datas of maximum	Total amount	A	Dances for	this manneaut
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup	tcy, did you make any pay	ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	insider? Include payments on debts guaranteed or co-	signed by an insider				
	_	orgrida by arr moladr.				
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	insider 5 Name and Address	bates of payment	paid	still owe	Include cred	
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	0.0300
	Case number	Nature of the case	Court or agency		Status Of th	e case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below. No. Go to line 11.		erty repossessed, f	oreclosed, garni	shed, attached	l, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	t			ргоролзу
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fii	nancial institution	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	court-appointed receiver, a custodian, or a		erty in the possess			fit of creditors, a
	■ No □ Yes					

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Case number (if known) Document Debtor 1 Samantha L Holder

Par	t 5: List Certain Gifts and Contributions	s			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more the	han \$600 per person	?
		_	D 11 11 16	D /	., .
	Gifts with a total value of more than \$600 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru	uptcy,	did you give any gifts or contributions with a total	I value of more than	\$600 to any charity?
	■ No		, , , , ,		
	☐ Yes. Fill in the details for each gift or co	ontribu	ution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	ptcy o	r since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	Describe the property you lost and	Dosc	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	repar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		erty to anyone you
	□ No				
	Yes. Fill in the details.			_	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Daniel J Winter 53 W Jackson Boulevard Suite 718 Chicago, IL 60604 djw@DWinterLaw.com		Attorney Fees	various	\$6,000.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that you have	litors		or transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Samantha L Holder

18.	transferr Include b	years before you filed for bankrup ed in the ordinary course of your oth outright transfers and transfers n fts and transfers that you have alrea	business or financial and and a security (such as	ffairs? s the granting of a				
	■ No □ Yes	Fill in the details.						
		Who Received Transfer	Description and property transfe		paym	ribe any property or ents received or debts		ate transfer was
	Person's	s relationship to you			paid i	n exchange		
19.		O years before you filed for bankruary? (These are often called asset-p		any property to a	a self-settle	d trust or similar device	e of v	which you are a
	_	Fill in the details.						
	Name of	ftrust	Description and	I value of the pro	perty trans	sferred		ate Transfer was
Pai	nt 8∙ lie	t of Certain Financial Accounts, In	netrumente. Safe Deno	sit Royas and S	torage Unit	te.		lauc
ı a		·	•	•	•			
20.		year before you filed for bankrupt ved. or transferred?	cy, were any financial a	accounts or inst	ruments he	eld in your name, or for	your	benefit, closed,
	Include o	checking, savings, money market, pension funds, cooperatives, asso				t; shares in banks, cred	dit un	nions, brokerage
	_	. Fill in the details.						
		Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account number		Type of account or instrument closed, sold, moved, or transferred		moved, or		Last balance before closing or transfer
21.		ow have, or did you have within 1 other valuables?	year before you filed for	or bankruptcy, a	ıny safe de _l		sitor	y for securities,
	■ No □ Yes.	. Fill in the details.						
		f Financial Institution 6 (Number, Street, City, State and ZIP Code)	Who else had an Address (Number State and ZIP Code)		Describe the contents			Do you still have it?
22.	Have you	ı stored property in a storage unit	or place other than yo	ur home within 1	l year befo	re you filed for bankrup	tcy?	
	■ No □ Yes	. Fill in the details.						
		f Storage Facility S (Number, Street, City, State and ZIP Code)	Who else has of to it? Address (Number State and ZIP Code)		Describe	the contents		Do you still have it?
Pai	rt 9: Ide	entify Property You Hold or Contro	ol for Someone Else					
23.		old or control any property that s		clude any prope	rty you bor	rowed from, are storing	ı for,	or hold in trust
	■ No □ Yes	. Fill in the details.						
	Owner's Address	Name (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	the property		Value
Pai	rt 10: Giv	ve Details About Environmental In	formation					
 -	4h.a. m	so of Bart 10, the following definit	liono onniu					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 17-12304 Entered 04/19/17 14:41:09 Desc Main Doc 1 Filed 04/19/17 Page 46 of 60 Case number (if known) Document

Debtor 1 Samantha L Holder

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste hazardous substance toxic substance

	hazardous material, pollutant, contaminant, or similar term.							
Rep	ort all notices, releases, and proceedings the	at you know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that	t you may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envir	onmental law? Include settlements a	ind orders.				
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	111: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	□ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	□ No. None of the above applies. Go to Part 12.							
	■ Yes. Check all that apply above and fill	in the details below for each business.						
		Describe the nature of the business						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security in Dates business existed	number or IIIN.				
	Samantha L Holder Dental Services LLC	Dental practice	EIN: 46-5073330					
	fdba Autumn Dental 19648 S LaGrange Rd Unit B Mokena, IL 60448	Lori L Stadler CPA 760 Village Center Dr #240 Burr Ridge IL 60527	From-To 2013-March 2017					

Document Page 47 of 60 Debtor 1 ase number (if known) Samantha L Holder 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Samantha L Holder Signature of Debtor 2 Samantha L Holder Signature of Debtor 1 Date April 17, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 04/19/17 14:41:09

Case 17-12304

Doc 1

Filed 04/19/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debto	or 1	Samant	ha L H	lolder			Casa number		
							Case number (if kno	wn)	
28. W	Vithin nstitu	2 years t tions, cre	efore) ditors,	you filed for bankru or other parties.	iptcy, did you give a l	financial statemen	nt to anyone about yo	ur business? Include all financial	ı
	N	0							
] Y	es. Fill in	the det	ails below.					
A	iame Iddre Yumbe	88	, State a	nd ZIP Code)	Date Issued		entra Bull		
Part 1	2 8	ign Belov	v			ing a sama sama sama sama sama sama sama s			
18 U.S.	C. §§	CUPICY CE	r can	stand that making result in fines up to and 3571.	o \$250,000, or impriso	of Debtor 2	ind i dectare under pi , or obtaining money 0 years, or both.	enalty of perjury that the answers or property by fraud in connection	;n
Date		山			Date				
Did you ■ No □ Yes	atta	ch additio	nal pa	ges to Your Statem	ent of Financial Affai	rs for Individuals	Filing for Bankruptcy	- r (Official Form 107)?	
Did you No	pay	or agree t	o pay s	someone who is no	t an attomey to help	you fill out bankrı	uptcy forms?		
☐ Yes. I	Name	of Person)	Attach the Bankru	ıptcy Petition Preparer	's Notice, Declaration	on, and Signature (Offi	cial Form 119).	

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Fill in this infor	mation to identify your case			
Debtor 1	Samantha L Holder			
Dahtaro	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NC	RTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme	nt of Intention f	or Indiv	iduals Filing Under Chapte	er 7 12/15
			<u> </u>	
If you are an ind	ividual filing under chapter	7, you must fill	out this form if:	
creditors hav	e claims secured by your pr	operty, or		
•	sed personal property and the		•	
			you file your bankruptcy petition or by the date se time for cause. You must also send copies to th	
on the		urt exterios tric	s time for dauge. For must also send dopies to the	ordanoro ana lessoro you not
If two married no	eonle are filing together in a	ioint case, hot	th are equally responsible for supplying correct in	nformation Both debtors must
	nd date the form.	jonn ouse, so	in the equally responsible for supplying confect in	mormation. Both desicro must
Be as complete	and accurate as possible. If	more snace is	needed, attach a separate sheet to this form. On	the top of any additional pages
•	our name and case number		needed, attach a separate sheet to this form. On	the top of any additional pages,
Dort 1: List V	aur Craditara Wha Haya Say	urad Claima		
Part 1: List Y	our Creditors Who Have Sec	cured Claims		
1. For any credit information be	•	of Schedule D:	Creditors Who Have Claims Secured by Property	y (Official Form 106D), fill in the
	edow. editor and the property that is	collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's F	Ford Motor Credit		☐ Surrender the property.	□ No
name:	ora motor Great		☐ Retain the property and redeem it.	□ NO
			Retain the property and enter into a	■ Yes
Description of			Reaffirmation Agreement.	
property	1/2 owner with HusbarHolder	id Kyle	Retain the property and [explain]:	
securing debt	Holuei		make payments	_
Creditor's V	Vells Fargo Hm Mortgag		Currender the property	□ No
name:	Tono i argo inii mortgag		☐ Surrender the property. ☐ Retain the property and redeem it.	LI INU

Part 2: List Your Unexpired Personal Property Leases

60451 Will County

Purchased in 2011 for

2813 Cole Lane New Lenox, IL

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

make payments

☐ Retain the property and enter into a

Reaffirmation Agreement.

Retain the property and [explain]:

Describe your unexpired personal property leases

\$327,829.00

Will the lease be assumed?

Yes

Official Form 108

Description of

securing debt:

property

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Debtor 1	Samantha L Holder	Case number (if known)	
Lessor's na Description Property:	ame: n of leased		□ No
Lessor's na	ame: n of leased		□ No
Property:			☐ Yes
Lessor's na	ame: n of leased		□ No
Property:			☐ Yes
Lessor's na	ame: n of leased		□ No
Property:			☐ Yes
Lessor's na	ame: n of leased		□ No
Property:			☐ Yes
Lessor's na	ame: n of leased		□ No
Property:			☐ Yes
Lessor's na	ame: n of leased		□ No
Property:	0. 100000		☐ Yes

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Debto	Samantha L Holder	Case number (if known)
D = # 0	Olan Balana	
Part 3	Sign Below	
	penalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
χ /	s/ Samantha L Holder	X
S	Samantha L Holder	Signature of Debtor 2
S	ignature of Debtor 1	

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Debtor 1 Samantha L Holder	Case number (# known)
Lessor's name: Description of leased	□ No
Property:	□ Yes
Lessor's name: Description of leased	□ No
Property:	□ Yes
Lessor's name: Description of leased	
Property:	□ No
Lessor's name:	☐ Yes
Description of leased Property:	□ No
Lessor's name:	☐ Yes
Description of leased Property:	□ No
Lessor's name	☐ Yes
Description of leased Property:	□ No
Lessor's name:	☐ Yes
Description of leased Property:	□ No
	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indica property that is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
x Sk	x
Samantiva L'Holder Signature of Debtor 1	Signature of Debtor 2
Date 4111	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-12304 Doc 1 Filed 04/19/17 Entered 04/19/17 14:41:09 Desc Main Document Page 57 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Samantha L Holder		Case N	lo.
		Debtor(s)	Chapte	7
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)
c	ursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the filter rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be p	aid to me, for services rendered or to
	For legal services, I have agreed to accept		\$	6,000.00
	Prior to the filing of this statement I have received	1	\$	6,000.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed com	pensation with any other persor	unless they are m	nembers and associates of my law firm
[I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na			
6. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ets of the bankrupt	cy case, including:
b c d	Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi Representation of the debtor in adversary proceedin [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	atement of affairs and plan whice tors and confirmation hearing, a ags and other contested bankruph reduce to market value; ex tons as needed; preparation	h may be required and any adjourned acy matters; emption planni	; hearings thereof; ng; preparation and filing of
7. E	y agreement with the debtor(s), the above-disclosed for Representation of the debtors in any deproceeding.	ee does not include the followin ischargeability actions, jud	g service: icial lien avoida	nnces, or any other adversary
		CERTIFICATION		
	certify that the foregoing is a complete statement of a nkruptcy proceeding.	ny agreement or arrangement fo	r payment to me f	or representation of the debtor(s) in
Ap Do	oril 17, 2017 te	/s/ Daniel J Winter Of Daniel J Winter Of Signature of Attorn Law Offices of D 53 W Jackson B Suite 718 Chicago, IL 6066 312-427-1613	6208223 ey vaniel J Winter oulevard 04 ax: 312-663-131	2
		djw@dwinterlaw Name of law firm	.com	

United States Bankruptcy Court Northern District of Illinois

In re	Samantha L Holder		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	28
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to the	he best of my
Date:	April 17, 2017	/s/ Samantha L Holder Samantha L Holder Signature of Debtor		

United States Bankruptcy Court Northern District of Illinois

In re Samantha L Holder

Debtor(s)

Case No. Chapter

VERIFICATION OF CREDITOR MATRIX

Number of Creditors:

25

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: 4/17/17

Samantha L Holder Signature of Debtor

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Columbus, OH 43218

3010 Highland Parkway Suite 625 Downers Grove, IL 60515

Associated Radiologists of Joliet c/o CCB PO Box 63 Kankakee, IL 60901-0063

Comenitycapital/ultamc Po Box 182120 Columbus, OH 43218

Patterson Dental 1031 Mendota Rd Saint Paul, MN 55120

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Crown Council Inc 975 Woodoak Lane Salt Lake City, UT 84117 Silver Cross Hospital 1200 Maple Road Joliet, IL 60432

Benco Dental 295 Centerpoint Blvd PO Box 491 Pittston, PA 18640-0491

First Midwest Bank 7800 W 95th Street Hickory Hills, IL 60457 Synchrony Bank/Gap Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Capadona Law Firm Ltd 360 W Butterfield Rd Suite 300 Elmhurst, IL 60126

Ford Motor Credit National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962

Tdrcs/furniture First 1000 Macarthur Blvd Mahwah, NJ 07430

Capital One General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Ford Motor Credit National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962

Technic Dental Lab Inc 11555 W 183rd Place Orland Park, IL 60467-4910

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Jemco & Assoc. Ltd 242 Bunting Lane Bloomingdale, IL 60108 Village of Mokena 11004 Carpenter St Mokena, IL 60448

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Nelnet Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Nelnet Nelnet Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

Comcast PO Box 3001 Southeastern, PA 19398-3001 Nicor Gas PO Box 5407 Carol Stream, IL 60197-5407